SUBMIN: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58

Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

R Date Stamp (Received)

JUL 15 2022

Bayfield Co.
Planning and Zoning Agency

Permit #:	23-022 GENTERED
Date:	9-2-9002
Amount Paid:	\$150 8-4-22 Respecy blb 7/1-
Other:	
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid.

DO NOT START CO	NSTRUCTION	UNTIL A	ALL PERMITS I	HAVE BEEN ISSUED TO	APPLICANT.	Priginal	Application M	IUST be submi	tted FIL	L OUT IN INK (I	NO PENCIL)	
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Address of Property		1		Cit	y/State/Zip:	1/		DYNUCO	Piu,		Phone:	
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Contractor:	Set 1			Contra	ctor Phone:	P	Plumber:			Plun	nber Phone:	
Authorized Agent:	(Person Sign	ng Applica	ation on behalf	of Agent I	Phone:	-	Agent Mailing Ado	dress (include City	//State/Zip):	Wri	tten Authorization	
Owner(s))		20 10		- Secondary India					×	Re	quired (for Agent)	
PROJECT LOCATION		ption:	(Use Tax Stat		7821				Rècorded	Document: (Showing	ng Ownership)	
X		Gov	't Lot	Lot(s) CSM		SM Doc	# Lot(s) #	Block #	Subdivision	nn:		
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	INS Prop	perty/La	ina Within 1	000 feet of Lake, Po	ond or Flowage yescontinue –	→	Distance Struct	ture is from Sho	oreline : feet	□ Yes	☐ Yes No	
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Shoreland												
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APPLICANT - PLEASE COMPLETE PLOT PLAN In the box below: Draw or Sketch your Property (regardless of what you are applying for) (1)Show Location of: **Proposed Construction** Show / Indicate: Fill Out in Ink - NO PENCIL (2)North (N) on Plot Plan (3)Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (4)Show: All Existing Structures on your Property (5)Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (6)Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond Show any (*): (*) Wetlands; or (*) Slopes over 20% Duelli

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

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(8) Setbacks: (measured to the closest point)

Description	Setback Measurements		Description	Setback Measurements
				1.
Setback from the Centerline of Platted Road	/85 Feet		Setback from the Lake (ordinary high-water mark)	700 338 Feet
Setback from the Established Right-of-Way	Feet		Setback from the River, Stream, Creek	Feet
	V		Setback from the Bank or Bluff	Feet
Setback from the North Lot Line	100 Feet			
Setback from the South Lot Line	12 Feet		Setback from Wetland	Feet
Setback from the West Lot Line	300,338 Feet		20% Slope Area on the property	☐ Yes ☐No
Setback from the East Lot Line	770 Feet		Elevation of Floodplain	Feet
	(X			Ť
Setback to Septic Tank or Holding Tank	75 Feet		Setback to Well	Feet
Setback to Drain Field	NA Feet		- 8	3.25 N
Setback to Privy (Portable, Composting)	WA Feet			,
		the bo	pundary line from which the setback must be measured must be visible from	one previously surveyed corner to the

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

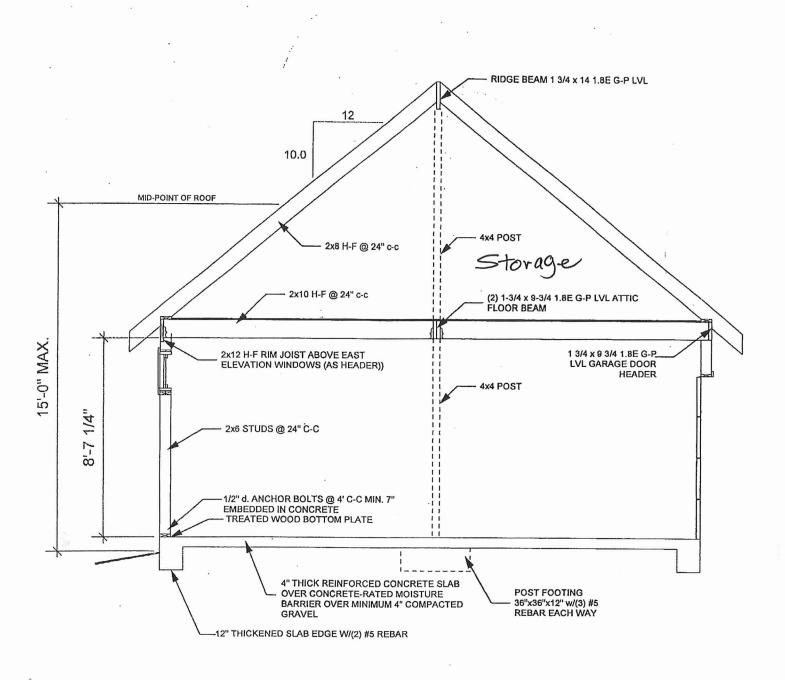
For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

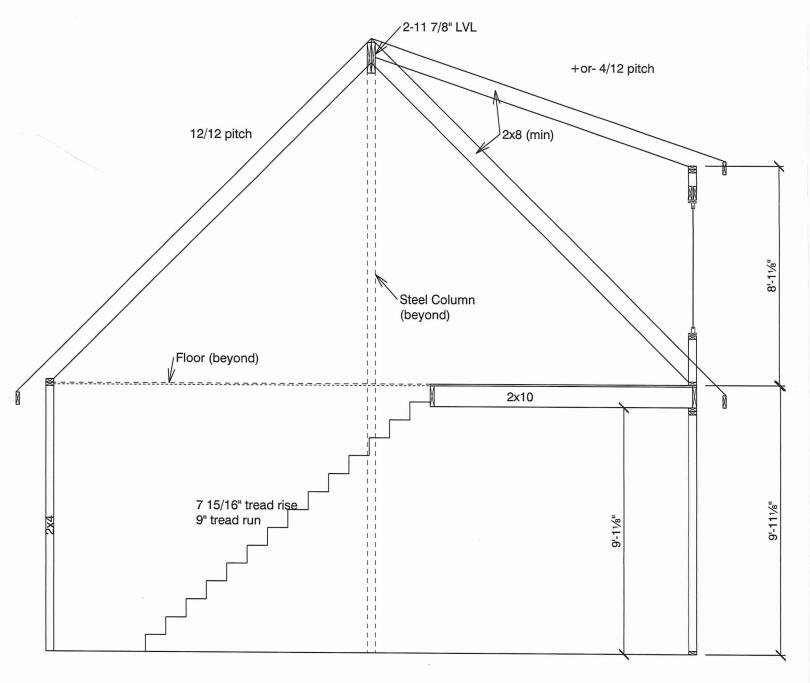
You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:	VA	# of bedrooms:	Sanitary Date:					
Permit Denied (Date):	Reason for Denial:		and problems						
Permit #: 22-0224	Permit Date:9-2-0	2022	AND COLOR OF STREET						
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming □ Yes (Deed of Recondance of Parcel o	ous Lot(s))	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required Affidavit Attached Yes No					
Granted by Variance (B.O.A.) ☐ Yes No Case #:	Tal Gross	Previously Granted by		e #:					
Was Parcel Legally Created Was Proposed Building Site Delineated Yes □ No	1-20-3	Were Property Lines Represented by Owner Was Property Surveyed WYes WYes WYes No							
Inspection Record: Property live marked by Survey	or + site ma	red		Zoning District () Lakes Classification ()					
Date of Inspection: 8-11-22	Inspected by: 4M			Date of Re-Inspection: 8-70-22					
Condition(s): Town, Committee or Board Conditions Attached? Tes No-(If No they need to be attached.) To welf all set backs, including ears and overhangs. No plumbing permitted. Us bedrooms/living quarters permitted. For personal storage only.									
Signature of Inspector: Will Malloman	7		MATERIAL PROPERTY OF THE	Date of Approval: 8-76-72					
Hold For Sanitary: Hold For TBA:	Hold For Affic	davit: 🗆	Hold For Fees:						

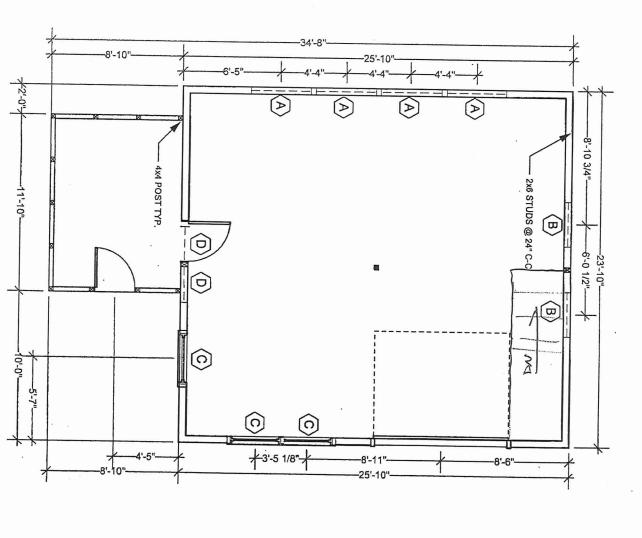


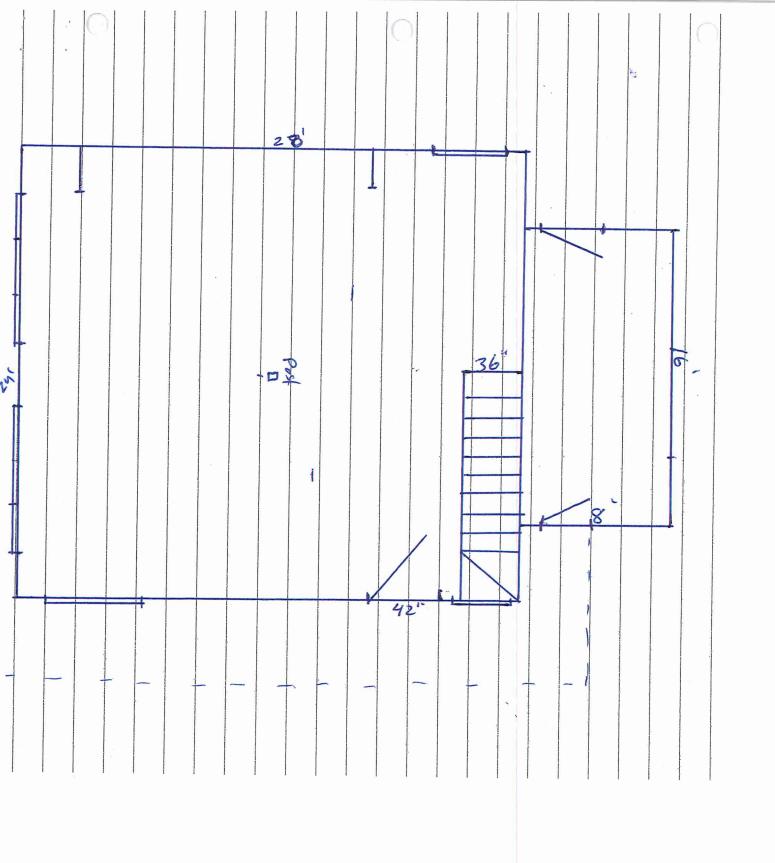
1 GARAGE SECTION
A5 Scale: 1/4" = 1'-0"

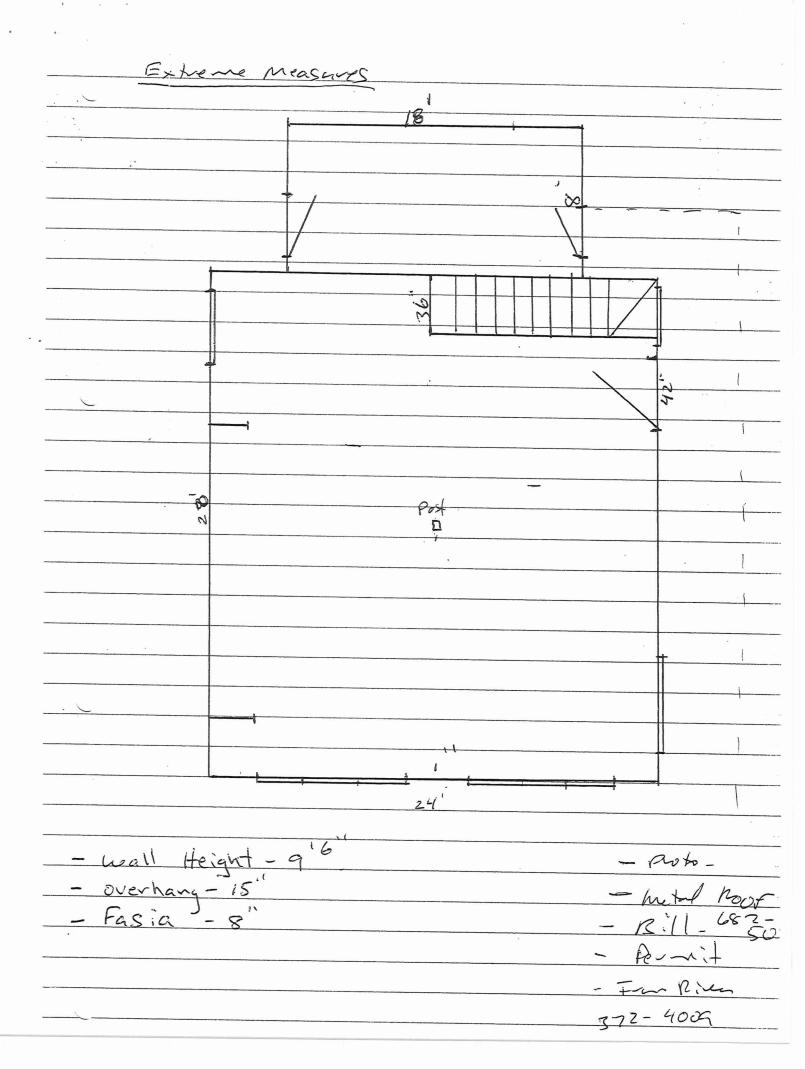
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Scale: 1/2" = 1'-0"







- Front Back - 2 awnings 5,20 ? - Right - Shad dormen - 27, double thing or 51,20
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roddo
Lock = (4) - 2 Fixed; 2 Herring - Engl Vernow Front = 2 - 8 Garage Doors of whole Front = 2 - 8 Garage Doors of his whole Right = 2 - 8 Garage Doors of his whole
2 - (4) - 2 + 1 × 2 + 2 × 1 × 2 × 1 × 2 × 1 × 2 × 2 × 2 × 2 ×
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Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X (Shoreland)
SANITARY SIGN SPECIAL CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.	22-0224	į,	Issued	d To: Je	ffrey	Splitgaber							
Location:	1/4	of	1/4	Section	31	Township	51	N.	Range	6	W.	Town of	Bell
Par in Gov't Lot In V. 958 F	2 P. 966	Lot		Blo	ock	Sul	bdivisio	on				CSM#	

Residential Structure in R-1 zoning district

completed or if any prohibitory conditions are violated.

For: Accessory: [2- Story]; Garage (28' x 24'); Storage Room (8' x 16') = Overall (36' x 24') at a Height of 20'

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Must meet and maintain setbacks including eaves and overhangs. No Plumbing allowed. No bedrooms and/or living space permitted/allowed. For personal storage only.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE:	This permit expires one year from date of issuance if the authorized construction	Erica Meulemans, AZA
	work or land use has not begun.	Authorized Issuing Official
	Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found	
	to have been misrepresented, erroneous, or incomplete.	September 2, 2022
	This permit may be void or revoked if any performance conditions are not	Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

RECEIVED

AUG 08 2022

Permit #: Date: **Amount Paid:** Other: Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid. Bayfield Co.
Planning and Zoning Agency Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. Original Application MUST be submitted FILL OUT IN INK (NO PENCIL) TYPE OF PERMIT REQUESTED ☐ LAND USE SANITARY ☐ PRIVY ☐ CONDITIONAL USE ☐ SPECIAL USE □ B.O.A. OTHER Owner's Name: Mailing Address: City/State/Zip: Telephone 875 Henr 715-742-3967 87550 Stage Cell Phone: 27 48 Cornucobi Email: (print clear) None None Contractor: Contractor Phone: Plumber: Plumber Phone: Authorized Agent: (Person Signing Application on behalf of Agent Phone: Agent Mailing Address (include City/State/Zip): Written Authorization Owner(s)) Required (for Agent) Tax ID# Recorded Document: (Showing Ownership) PROJECT Legal Description: (Use Tax Statement) LOCATION Fruit Land Gov't Lot Lot(s) CSM Vol & Page CSM Doc# Lot(s) # Block # Subdivision: IV W 1/4, NW 1/4 SiskiwiTt River Town of: Lot Size Section 2 , Township TSO NN, Range RD6W W Acreagé 10 acer ☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent) s your Property in Floodplain Distance Structure is from Shoreline: Are Wetlands Creek or Landward side of Floodplain? ☐ Shoreland Is Property/Land within 1000 feet of Lake, Pond or Flowage ☐ Yes Distance Structure is from Shoreline: ☐ Yes If yes---continue -No. feet M Non-Shoreland Value at Time Total # of What Type of Type of of Completion **Project Project** bedrooms Sewer/Sanitary System(s) Water include Project # of Stories \$10,000.00 **Foundation** on Is on the property or donated time on Will be on the property? property & material Grave property ■ New Construction 1-Story Municipal/City Basement □ 1 ☐ City \$10,000 □ 1-Story + (New) Sanitary Specify Type: ☐ Addition/Alteration 1 2 □ Foundation ☐ Well Loft Sanitary (Exists) Specify Type: $\ \ \square \ \ Conversion$ ☐ 2-Story ☐ Slab □ 3 None a Gravel ☐ Relocate (existing bldg) Privy (Pit) or Uaulted (min 200 gallon) ☐ Run a Business on Use ☐ Portable (w/service contract) X None **Property** Year Round □ Compost Toilet X None **Existing Structure:** (if addition, alteration or business is being applied for) Length: Width: **Height:** Proposed Construction: (overall dimensions) 251 201 10)1

Proposed Use	1	Proposed Structure		Dimensions	Square
					Footage
		Principal Structure (first structure on property)	1	Х)	
		Residence (i.e. cabin, hunting shack, etc.)	(X)	
▼ Residential Use		with Loft	(X)	
		with a Porch	(X)	
		with (2 nd) Porch	(x)	
		with a Deck	(X)	
☐ Commercial Use		with (2 nd) Deck	(X)	
Commercial ose		with Attached Garage	x)		
		Bunkhouse w/ (\square sanitary, or \square sleeping quarters, or \square cooking & food prep facilities)	(х)	
		Mobile Home (manufactured date)	(х)	
☐ Municipal Use		Addition/Alteration (explain)	(Х)	
	X	Accessory Building (explain) Car Port	(х)	
-		Accessory Building Addition/Alteration (explain)	(25×201	500'
		Special Use: (explain)	(x)	
~		Conditional Use: (explain)	(х)	
		Other: (explain)	(х)	

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s):							
(If there are Multiple	e Owners listed o	n the Deed <u>A</u>	All Owners mus	sign <u>or</u> le	tter(s) of autho	orization must acc	ompany this application)
Authorized Agent:							(See Note below)

Date		
_		

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit

Attach Copy of Tax Statement

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CEVED Agency



In the box below: Draw or Sketch your Property (regardless of what you are applying for) (1) Show Location of: **Proposed Construction** (2)Show / Indicate: North (N) on Plot Plan Fill Out in Ink - NO PENCIL (3)Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (4)Show: All Existing Structures on your Property (5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (6)Show any (*): (7) Show any (*): (*) Wetlands; or (*) Slopes over 20% = Proposed Var port 10 acers Existing Stage Drivewa Existin (>) Garage 20 St From House To New Shed Please complete (1) - (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

			Description	Setb Measure	
		i i			
350'	Feet		Setback from the Lake (ordinary high-water mark)	NA	Feet
NA	Feet	ys,	Setback from the River, Stream, Creek	NA	Feet
			Setback from the Bank or Bluff	NA	Feet
1-001	Feet		,		
2001	Feet	7	Setback from Wetland	IVA	Feet
3501	Feet		20% Slope Area on the property		ΧNο
1,000'	Feet		Elevation of Floodplain		Feet
				,	
1 DD	Feet	J.	Setback to Well	100	Feet
120	Feet			,,,,	, , ,
1//	Feet				
	350' N'A FCO' 300' 350' 1,000'	### Feet Feet 100 Feet 100 Feet 100 Feet Feet	Measurements 350 Feet	Measurements 3 5 0 Feet Setback from the Lake (ordinary high-water mark) N' A Feet Setback from the River, Stream, Creek Setback from the Bank or Bluff Feet Setback from Wetland 3 5 0 Feet Setback from Wetland 1 00 Feet Setback foodplain 1 00 Feet Setback to Well 3 0 0 Feet Setback to Well 1 0 0 Feet Setback to W	Measurements Description Measurements Setback from the Lake (ordinary high-water mark) NA Feet Setback from the River, Stream, Creek Setback from the Bank or Bluff POO Feet Setback from Wetland Setback from Wetland NA Setback from the Bank or Bluff NA Setback from Wetland NA Setback from Wetland NA Setback from Wetland NA Setback from Feet Setback from Wetland NA NA NA NA NA NA NA NA NA N

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number: NA		# of bedrooms:	Sanitary Date:					
Permit Denied (Date):	Reason for Denial:								
Permit #: 22-0225	Permit Date: 9-9- al	122							
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Record Yes Yes	ous Lot(s))	Nitigation Required Nitigation Attached		Affidavit Required ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No					
Granted by Variance (B.O.A.) \(\textstyle \text{Yes} \) \(\textstyle \text{Yes} \) \(\textstyle \text{Yes} \) \(\text{Case #:} \)		reviously Granted by Yes ÆNo	Variance (B.O.A.)	#:					
Was Parcel Legally Created Was Proposed Building Site Delineated Yes □ No No		Were Property Lines Represented by Owner Was Property Surveyed ✓ Yes ✓ Yes ✓ No							
Inspection Record: STIL WAS STATED				Zoning District (P-1) Lakes Classification ()					
	Inspected by: 9M			Date of Re-Inspection:					
Condition(s): Town, Committee or Board Conditions Attached? Yes No-(If No they need to be attached.) To weet all set backs, including eaves and overhangs. For personal storage only. Town/state/DNR permits may be needed.									
Signature of Inspector: The Manageman	2			Date of Approval: 8-25-7022					
Hold For Sanitary: 🗆 Hold For TBA: 🗆	Hold For Affidavi	t: 🗆	Hold For Fees:						

Field Investigation 8-13-000

	O,	-09 000
Dais: 8-22-7027	Arrive: W.3	Depart 11:35
Landowner: Weege, Menry	Photos taken:	Yes No
Project Location: 87550 Stuge 2d	Persons Present	
Waterway: Cornucopic	Purpose of visit	
	ZP Onsite	SAP
PIN#*Alfach Real Estate Inquiry*	Sanitary	Wetland Delineation
	Floodplain	OHWM
	Boathouse	Complaint
Paid \$ Receipt #	Averaging	Walkout
	Ofther:	

R-1 47.80005 Chr port 25+70





Town, City, Village, State or Federal Permits May Also Be Required

to have been misrepresented, erroneous, or incomplete.

completed or if any prohibitory conditions are violated.

This permit may be void or revoked if any performance conditions are not

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

September 2, 2022

Date

Henry Weege 22-0225 Issued To: No. Bell 50 W. N. Range 6 Town of Location: $\frac{1}{4}$ of 1/4 Section **Township** E 1/2 Lot 9 less S 40' & E 1/2 Lot 10 and all of Siskiwit River Valley Fruit Land Co CSM# Gov't Lot 11-14 Subdivision Lot Block less platted roads Residential Structure in R-1 zoning district For: Accessory: [1-Story]; Car Port (25' x 20') = 500 sq. ft.] Height of 12' (Disclaimer): Any future expansions or development would require additional permitting Condition(s): Must meet and maintain setbacks including eaves and overhangs. Not for Human Habitation or Sleeping Purposes. For Personal Storage only. Town/State/DNR permits may be needed. Erica Meulemans, AZA **NOTE:** This permit expires one year from date of issuance if the authorized construction work or land use has not begun. Authorized Issuing Official Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found